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| Official Form 1 (4/07) | | annone | | 90 - (| | | | |
|---|--|--|---------------------|--|---|--|-----------------------|-------------------------------|
| | States Bankr orthern District o | | | | | | Voluntar | y Petition |
| Name of Debtor (if individual, enter Last, Firs Gouty, Kimberly Ann | t, Middle): | | Name | of Joint I | Debtor (Spouse | e) (Last, First, | Middle): | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | ther Name de marrie | es used by the d, maiden, and | Joint Debtor i I trade names) | n the last 8 years | |
| Last four digits of Soc. Sec./Complete EIN or c xxx-xx-5582 | other Tax ID No. (if more | than one, state a | ll) Last f | our digits | of Soc. Sec./C | Complete EIN | or other Tax ID No. | (if more than one, state all |
| Street Address of Debtor (No. and Street, City, 2009 Wacker Rd., #14 Savanna, IL | and State): | ZID C. 1. | Street | Address | of Joint Debtor | r (No. and Str | eet, City, and State) | |
| | 6 | ZIP Code 1074 | 1 | | | | | ZIP Code |
| County of Residence or of the Principal Place Carroll | | - | Count | ty of Resi | dence or of the | Principal Pla | ice of Business: | |
| Mailing Address of Debtor (if different from st | reet address): | | Mailir | ng Addres | ss of Joint Deb | tor (if differer | nt from street addres | s): |
| | | ZIP Code | | | | | | ZIP Code |
| Location of Principal Assets of Business Debto (if different from street address above): | or | | | | | | | |
| Type of Debtor | Nature of | Business | | | Chapter | r of Bankrup | tcy Code Under W | hich |
| (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) | ☐ Health Care Busi ☐ Single Asset Rea in 11 U.S.C. § 10 ☐ Railroad ☐ Stockbroker ☐ Commodity Brol ☐ Clearing Bank ☐ Other ☐ Tax-Exen ☐ Check box, ☐ Debtor is a tax-e under Title 26 of Code (the Internal | al Estate as d D1 (51B) ker npt Entity if applicable) xempt organ if the United is | ization States | defin | pter 9 pter 11 pter 12 | of Crost Check Consumer debts, \$ 101(8) as idual primarily | bu for | ceeding r Recognition |
| Filing Fee (Check of | · ` | | | one box | : | Chapter 11 | Debtors | |
| □ Full Filing Fee to be paid in installments (application for the court's corris unable to pay fee except in installments. □ Filing Fee waiver requested (applicable to attach signed application for the court's corrected. | sideration certifying the Rule 1006(b). See Offici chapter 7 individuals or | at the debtor ial Form 3A. nly). Must | Check | Debtor is if: Debtor's to inside all applie A plan i | is not a small be aggregate not a saggregate not affiliates cable boxes: is being filed wances of the pla | ncontingent li) are less than with this petition an were solicit | | duding debts owed one or more |
| Statistical/Administrative Information Debtor estimates that funds will be available | e for distribution to uns | secured cred | itors. | | | THIS | SPACE IS FOR COU | RT USE ONLY |
| Debtor estimates that, after any exempt pro | | | e expense | es paid, | | | | |
| there will be no funds available for distribu | uon to unsecured credi | tors. | | | | - | | |
| Estimated Number of Creditors 1- 50- 100- 200- | 1000- 5001- | 10,001- | 25,001- | 100,001 | - OVER | | | |
| 49 99 199 999 ■ □ □ □ | 5,000 10,000 | 25,000 | 50,000 | 100,000 | 100,000 | | | |
| Estimated Assets | | | | | | 1 | | |
| \$0 to \$10,000 to \$100,000 | \$100,001 to \$1 million | | 0,001 to million | _ | More than \$100 million | | | |
| Estimated Liabilities | | | | | | | | |
| \$0 to \$50,001 to \$50,000 | \$100,001 to \$1 million | | 0,001 to million | | More than \$100 million | | | |

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| Voluntary | Petition | Name of Debtor(s): Gouty, Kimberly Ann | | | |
|------------------------------|--|--|--|--|--|
| (This page mus | st be completed and filed in every case) | Couty, Killisony Allin | | | |
| | All Prior Bankruptcy Cases Filed Within Las | t 8 Years (If more than two, attach ad | ditional sheet) | | |
| Location Where Filed: | - None - | Case Number: | Date Filed: | | |
| Location Where Filed: | | Case Number: | Date Filed: | | |
| Pen | nding Bankruptcy Case Filed by any Spouse, Partner, or | Affiliate of this Debtor (If more than | one, attach additional sheet) | | |
| Name of Debto | or: | Case Number: | Date Filed: | | |
| - None - District: | | Relationship: | Judge: | | |
| District. | | Relationship. | Judge. | | |
| (To be compl | Exhibit A leted if debtor is required to file periodic reports (e.g., | (To be completed if debtor is an individual | hibit B whose debts are primarily consumer debts.) in the foregoing petition, declare that I | | |
| forms 10K an pursuant to So | nd 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.) | have informed the petitioner that [he of 12, or 13 of title 11, United States Coof | r she] may proceed under chapter 7, 11, le, and have explained the relief available fy that I delivered to the debtor the notice | | |
| ☐ Exhibit A | A is attached and made a part of this petition. | X_/s/ Mark E. Zaleski | August 22, 2007 | | |
| | | Signature of Attorney for Debtor(s) Mark E. Zaleski | (Date) | | |
| | Ext | nibit C | | | |
| | r own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition. | pose a threat of imminent and identifiable | harm to public health or safety? | | |
| No. | | | | | |
| Exhibit I If this is a join | eted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made | a part of this petition. | separate Exhibit D.) | | |
| | Information Regardin | ng the Debtor - Venue | | | |
| | (Check any ap | = | | | |
| • | Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for | | | | |
| | There is a bankruptcy case concerning debtor's affiliate, go | 1 , 1 11 2 | | | |
| | Debtor is a debtor in a foreign proceeding and has its print this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District. | s in the United States but is a defendar the interests of the parties will be serve | nt in an action or d in regard to the relief | | |
| | Statement by a Debtor Who Resides (Check all app | | 7 | | |
| | Landlord has a judgment against the debtor for possession | of debtor's residence. (If box checked, | complete the following.) | | |
| | (Name of landlord that obtained judgment) | | | | |
| | | | | | |
| | | | | | |
| | (Address of landlord) | | | | |
| | Debtor claims that under applicable nonbankruptcy law, the permitted to cure the entire monetary default that gave rise possession was entered, and | | | | |
| | Debtor has included in this petition the deposit with the coafter the filing of the petition. | ourt of any rent that would become due | e during the 30-day period | | |

Official Form 1 (4/07)

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Gouty, Kimberly Ann

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Kimberly Ann Gouty

Signature of Debtor Kimberly Ann Gouty

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

August 22, 2007

Date

Signature of Attorney

X /s/ Mark E. Zaleski

Signature of Attorney for Debtor(s)

Mark E. Zaleski

Printed Name of Attorney for Debtor(s)

Mark E. Zaleski

Firm Name

10 North Galena Avenue Suite 220 Freeport, IL 61032

Address

Email: attyzaleski@cjrinc.com

815-233-0995 Fax: 815-232-3227

Telephone Number

August 22, 2007

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

FORM B1, Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

| In re | Kimberly Ann Gouty | | Case No. | |
|-------|--------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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Official Form 1, Exh. D (10/06) - Cont.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.] |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to |
| financial responsibilities.); |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.); |
| ☐ Active military duty in a military combat zone. |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |
| I certify under penalty of periury that the information provided above is true and correct. |

Signature of Debtor: /s/ Kimberly Ann Gouty

Kimberly Ann Gouty

Date: August 22, 2007

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Form 6-Summary (10/06)

United States Bankruptcy Court Northern District of Illinois

| In re | Kimberly Ann Gouty | | Case No | | |
|-------|--------------------|--------|---------|---|--|
| - | | Debtor | , | | |
| | | | Chapter | 7 | |
| | | | • | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|-------------------|-------------|--------|
| A - Real Property | Yes | 1 | 0.00 | | |
| B - Personal Property | Yes | 3 | 5,765.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 0.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 11 | | 23,300.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 427.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | 578.00 |
| Total Number of Sheets of ALL Schedu | ıles | 22 | | | |
| | T | otal Assets | 5,765.00 | | |
| | | | Total Liabilities | 23,300.00 | |

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Official Form 6 - Statistical Summary (10/06)

United States Bankruptcy Court Northern District of Illinois

| In re | Kimberly Ann Gouty | | Case No. | | |
|-------|--------------------|--------|----------|---|--|
| _ | | Debtor | | | |
| | | | Chapter | 7 | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | 427.00 |
|--|--------|
| Average Expenses (from Schedule J, Line 18) | 578.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 427.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 0.00 |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 23,300.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 23,300.00 |

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Form B6A (10/05)

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|---------|--|
| _ | _ | Debtor | |

SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Wife, Joint, or Community

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

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Form B6B (10/05)

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|---------|--|
| _ | | Debtor | |

SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

| | Type of Property | N O N Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|--|--|---|---|
| 1. | Cash on hand | Cash from child support | - | 10.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or | Checking account with Blackhawk Area Credit Union, Savanna, Illinois | - | 90.00 |
| | shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | Savings account with Blackhawk Area Credit Union, Savanna, Illinois | - | 35.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | Security deposit | - | 150.00 |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Furniture, furnishings, computer and misc computer equipment, appliances, and misc. other items. | - | 2,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | Books, pictures, videos, music cds and misc. other items | · <u>-</u> | 500.00 |
| 6. | Wearing apparel. | Debtor's clothing | - | 750.00 |
| 7. | Furs and jewelry. | Rings, watches and misc. other items | - | 200.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | Bicycles, exercise equipment and misc. other items | · - | 500.00 |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | |
| 10. | Annuities. Itemize and name each issuer. | x | | |

| Sub-Total > | 4,735.00 |
|----------------------|----------|
| (Total of this page) | |

² continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

| In re | Kimberly Ann Gouty | Case No. |
|-------|--------------------|----------|
| | | |

Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

| | | | (Continuation Sheet) | | |
|-----|---|------------------|--|---|---|
| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)). | х | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | Roth IRA with Blackhawk Area Credit Union, Savanna, Illinois | - | 30.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and | | Weekly child support | - | 40.00 |
| | property settlements to which the debtor is or may be entitled. Give particulars. | | Debtor is owed back child support in the approximate amount of \$500.00 from Rodney Proud II | - | 500.00 |
| 18. | Other liquidated debts owing debtor including tax refunds. Give | | Debtor get approximately \$260.00 on her link card every month for groceries | - | 260.00 |
| | particulars. | | Debtor gets the medical card through the state for herself and child. | - | 0.00 |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| | | | | | |
| | | | | Sub-Tota | al > 830.00 |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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Form B6B (10/05)

| In re | Kimberly Ann Gouty | Case No |
|-------|--------------------|---------|
| _ | | |

Debtor

SCHEDULE B. PERSONAL PROPERTY

| | Type of Property | N O N Description and Loc E | ation of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemptio |
|------|---|---|-------------------|---|---|
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | Х | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | x | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | х | | | |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | Х | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | Massage table, misc. small iten | ns | - | 100.00 |
| 30. | Inventory. | X | | | |
| 31. | Animals. | 1 cat - housepet | | - | 0.00 |
| 32. | Crops - growing or harvested. Give particulars. | x | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | Misc. household tools & implei | nents | - | 100.00 |
| | | | (Total | Sub-Tota of this page) | al > 200.00 |
| Shee | et 2 of 2 continuation sheets | attached | (10th) | | al > 5,765.00 |

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Form B6C (4/07)

| In re | Kimberly Ann Gouty | | Case No. | |
|-------|--------------------|--------|----------|--|
| • | | Debtor | | |

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds |
|---|---|
| (Check one box) | \$136,875. |
| ☐ 11 U.S.C. §522(b)(2) | |
| ■ 11 U.S.C. §522(b)(3) | |

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|--|----------------------------------|---|
| Cash on Hand Cash from child support | 735 ILCS 5/12-1001(b) | 10.00 | 10.00 |
| Checking, Savings, or Other Financial Accounts, C Checking account with Blackhawk Area Credit Union, Savanna, Illinois | rertificates of Deposit 735 ILCS 5/12-1001(b) | 90.00 | 90.00 |
| Savings account with Blackhawk Area Credit Union, Savanna, Illinois | 735 ILCS 5/12-1001(b) | 35.00 | 35.00 |
| Household Goods and Furnishings Furniture, furnishings, computer and misc computer equipment, appliances, and misc. other items. | 735 ILCS 5/12-1001(b) | 2,500.00 | 2,500.00 |
| Books, Pictures and Other Art Objects; Collectibles Books, pictures, videos, music cds and misc. other items | S 735 ILCS 5/12-1001(b) | 500.00 | 500.00 |
| Wearing Apparel Debtor's clothing | 735 ILCS 5/12-1001(a) | 750.00 | 750.00 |
| <u>Furs and Jewelry</u> Rings, watches and misc. other items | 735 ILCS 5/12-1001(b) | 200.00 | 200.00 |
| <u>Firearms and Sports, Photographic and Other Hob</u> Bicycles, exercise equipment and misc. other items | <u>by Equipment</u> 735 ILCS 5/12-1001(b) | 500.00 | 500.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension of Roth IRA with Blackhawk Area Credit Union, Savanna, Illinois | or Profit Sharing Plans 735 ILCS 5/12-1001(b) | 30.00 | 30.00 |
| Alimony, Maintenance, Support, and Property Settl Weekly child support | ements 735 ILCS 5/12-1001(g)(4) | 38.76 | 40.00 |
| Debtor is owed back child support in the approximate amount of \$500.00 from Rodney Proud II | 735 ILCS 5/12-1001(g)(4) | 100% | 500.00 |
| Other Liquidated Debts Owing Debtor Including Ta Debtor get approximately \$260.00 on her link card every month for groceries | <u>x Refund</u> 735 ILCS 5/12-1001(g)(1) | 100% | 260.00 |
| Other Personal Property of Any Kind Not Already I Misc. household tools & implements | <u>listed</u> 735 ILCS 5/12-1001(b) | 100.00 | 100.00 |

| Total: | 5.513.76 | 5.515.00 |
|--------|----------|----------|

____ continuation sheets attached to Schedule of Property Claimed as Exempt

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Official Form 6D (10/06)

| In re | Kimberly Ann Gouty | | Case No |
|-------|--------------------|-------------|---------|
| - | | , Debtor | |

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P.

name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| | _ | | * | | | | | |
|--|--------------------------------|-------------|--|----------|------------------|------------------|-------------------------------------|--------------------|
| CREDITOR'S NAME AND MAILING ADDRESS | СООШ | Н | Sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, | CONFL | U N L I | D I S P | AMOUNT OF CLAIM WITHOUT | UNSECURED |
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C J M | NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | - ×G≡×⊢ | QU I D A | DISPUTED | DEDUCTING VALUE OF COLLATERAL | PORTION, IF ANY |
| Account No. | | | | Т | E | | | |
| | | | | \vdash | D | Н | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | Value \$ | | | Ш | | |
| Account No. | | | | | | | | |
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| | | | | | | | | |
| | | | X/ 1 | | | | | |
| Account No. | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
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| | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
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| | | | | | | | | |
| | | | Value \$ | | | Щ | | |
| continuation sheets attached | 0 continuation sheets attached | | | | | | | |
| | | | (Total of th | - | _ | ŀ | | |
| | | | (D | | ota | - 1 | 0.00 | 0.00 |
| (Report on Summary of Schedule | | | | | | s) [| | |

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Official Form 6E (4/07)

| In re | Kimberly Ann Gouty | Case No. | |
|-------|--------------------|----------|--|
| - | | Debtor | |

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case

under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trust or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever

occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered provided. 11 U.S.C. § 507(a)(7).

☐ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Official Form 6F (10/06)

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|-------------|--|
| - | | , Debtor | |

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the

claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| under this con it decter has no electrons notating unseen | | | ŗ | | | | |
|--|-----------------|-------------|--|--------------|-----------|---|-----------------|
| CREDITOR'S NAME, | C | Ηι | usband, Wife, Joint, or Community | C | U | D | |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C A H | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE | COZHLZGEZ | UNLLQULDA | Ţ | AMOUNT OF CLAIM |
| Account No. | | | Collection | Ĭ | DATED | | |
| AFNI, Inc. PO Box 3097 Bloomington, IL 61702 | | - | | | D | | Unknown |
| Account No. 39-09-078-0730-23 | | | Utilities | \dagger | | | |
| Alliant Energy PO Box 351 Cedar Rapids, IA 52406-0351 | | - | Meter #s: 0058054103 / 0096054822 | | | | 1,600.00 |
| Account No. Unknown | | | Services rendered | | | | |
| AT&T PO Box 9001309 Louisville, KY 40290 | | - | | | | | |
| | _ | L | | \downarrow | | | 200.00 |
| Account No. Representing: AT&T | | | American Recovery Systems 555 St. Charles Dr., Suite 100 Thousand Oaks, CA 91360 | | | | |
| | | | (Total of t | Subt | | | 1,800.00 |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No. | |
|-------|--------------------|----------|--|
| _ | | Debtor | |

| | _ | | | | _ | _ | | |
|--|----------|-------------|--|------------|-----|--------|------|--------------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | | UNL | P | | |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | Q | SPUTED | AMOU | INT OF CLAIM |
| Account No. 700182 | | | Services rendered |]⊤ | T | | | |
| Brad Deary Motors Factory Outlet Store PO Box 1000 Maquoketa, IA 52060 | | - | | | D | | | 100.00 |
| Account No. Unknown | | | Credit card purchases | T | | | | |
| Bridgeview Mental Health 638 South Bluff Rd. Clinton, IA 52732 | | - | | | | | | |
| | | | | | | | | 300.00 |
| Account No. 4791-2424-0962-9964 | | | Credit card purchases | T | T | | | |
| Capital One Bank PO Box 60067 City Of Industry, CA 91716-0067 | | - | | | | | | |
| | | | | \perp | L | | | 1,000.00 |
| Account No. Representing: Capital One Bank | | | Blatt, Hasenmiller, Leibsker and Moore 125 S, Wacker Dr., Suite 400 Chicago, IL 60606 | | | | | |
| Jupital Ollo Balik | | | | | | | | |
| Account No. | | | Capital One | T | T | T | | |
| Representing: Capital One Bank | | | Bankruptcy Department PO Box 5155 Norcross, GA 30091 | | | | | |
| Sheet no1 of _10_ sheets attached to Schedule of | | | | Sub | | | | 1,400.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | paş | ge) | | 1,700.00 |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|---------|--|
| _ | _ | Debtor | |

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W H | IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | DZLLQULDA | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-------|--|-----------|-----------|----------|-----------------|
| Account No. | | | Capital One | Т | E | | |
| Representing: Capital One Bank | | | Bankruptcy Department PO Box 85167 Richmond, VA 23285-5167 | | | | |
| Account No. | | | Capital One Bank | T | T | | |
| Representing: Capital One Bank | | | PO Box 790216 Saint Louis, MO 63179-0216 | | | | |
| Account No. Unknown | | | Collection | | T | | |
| City of Savanna 101 Main Street Savanna, IL 61074 | | - | | | | | Unknown |
| Account No. Unknown | | | Collection | T | T | | |
| Clinton Veternarian Clinic c/o Creditor Services PO Box 52733 Clinton, IA 52733 | | - | | | | | 100.00 |
| Account No. | T | T | Credit card purchases | | T | | |
| Conseco Payment Services PO Box 981206 El Paso, TX 79998 | | _ | | | | | Unknown |
| Sheet no. 2 of 10 sheets attached to Schedule of | | | | Sub | | | 100.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | IIIS | paş | ge) | 1 |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|---------|--|
| _ | | Debtor | |

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | UNLIQUIDA | AMOUNT OF CLAIM |
|---|-----------------|------------------------|---|------------|-----------|-----------------|
| Account No. Creditor Protection Association 13355 Noel Rd. Dallas, TX 75240 | | - | Collection | Т | DATED | Unknown |
| Account No. 6011-0073-8019-4034 Discover PO Box 30395 Salt Lake City, UT 84130-0395 | | - | Credit card purchases | | | 3,000.00 |
| Account No. Representing: Discover | | | Baker, Miller, Markoff & Krasny 29 N. Wacker Drive, 5th Floor Chicago, IL 60606 | | | |
| Account No. Representing: Discover | | | Discover PO Box 15192 Wilmington, DE 19850-5192 | | | |
| Account No. Representing: Discover | | | Discover Financial Services PO Box 3007 New Albany, OH 43054-3007 | | | |
| Sheet no. <u>3</u> of <u>10</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | Sub his | | 3,000.00 |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No | |
|----------------|--------------------|---------|--|
| · - | | Debtor | |

| | | | | | _ | | |
|--|----------|-------------|---|------------|------|--------|-----------------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | 니 음 | UNL | D |) |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | l QU | SPUTED | AMOUNT OF CLAIM |
| Account No. Unknown | | | Utilities | Т | ΙE | | |
| Dish Network Department 0063 Palatine, IL 60055-0063 | | - | | | D | | Unknown |
| Account No. Unknown | | | Collection for East Savanna Welding | Т | T | | |
| East Savanna Welding c/o Businessmen's Collection Bureau PO Box 657 Freeport, IL 61032 | | - | | | | | 100.00 |
| Account No. Various accounts | ╁ | ╁ | Medical expenses | + | + | + | |
| Freeport Health Network/Hospital Central Business Office PO Box 857 Freeport, IL 61032-0857 | - | - | | | | | 100.00 |
| Account No. | | | Allied Business Accounts, Inc. | T | T | | |
| Representing: Freeport Health Network/Hospital | | | 300 1/2 South Second Street PO Box 1600 Clinton, IA 52733-1600 | | | | |
| Account No. | T | | Businessmen's Collection Bureau | \top | 十 | | |
| Representing: Freeport Health Network/Hospital | | | PO Box 657 Freeport, IL 61032 | | | | |
| Sheet no. 4 of 10 sheets attached to Schedule of | | | | Sub | | | 200.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | pag | ge) | |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No. | _ |
|-------|--------------------|----------|---|
| _ | | Debtor | |

| | | | | | — | _ | | |
|--|----------|-------------|---|------------|-------------|--------|-----------|---------|
| CREDITOR'S NAME, | C | Hu | usband, Wife, Joint, or Community | | U N L | P | | |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | l QU | SPUTED | AMOUNT OF | CLAIM |
| Account No. SB00002002254 | | | Utilities |]⊤ | T E | | | |
| Gallatin River Communications PO Box 1800 Galesburg, IL 61402-1800 | | - | | | D | | | ,500.00 |
| Account No. | T | | H&R Accounts, Inc. | \top | T | | | |
| Representing: Gallatin River Communications | | | 7017 John Deere Parkway PO Box 672 Moline, IL 61265 | | | | | |
| Account No. | | | Collection | | Ī | | | |
| H&R Accounts, Inc. 7017 John Deere Parkway PO Box 672 Moline, IL 61265 | | - | | | | | Uni | known |
| Account No. 6004300102859573 | | | Credit card purchases | T | Т | T | | |
| Household Bank PO Box 17051 Baltimore, MD 21297-1051 | | - | | | | | | 600.00 |
| Account No. | T | T | Arrow Financial Services LLC | T | T | T | | |
| Representing: Household Bank | | | 21031 Network Place Chicago, IL 60673-1210 | | | | | |
| Sheet no5 of _10_ sheets attached to Schedule of | • | _ | | Sub | | | , | ,100.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | ge) | | . 50.00 |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|---------|--|
| _ | _ | Debtor | |

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-----|---|------------|--------------|----------|-----------------|
| Account No. | | | Household Credit Services | T | E | | |
| Representing: | | | PO Box 88000 Baltimore, MD 21288-0001 | | | | |
| Household Bank | | | | | | | |
| Account No. | | | Credit card purchases | | | | |
| HSBC Card Services PO Box 17051 Baltimore, MD 21297-1051 | | - | | | | | |
| | | | | | | | 0.00 |
| Account No. | | | HSBC Card Services | | | | |
| Representing: | | | PO Box 15521 Wilmington, DE 19805 | | | | |
| HSBC Card Services | | | | | | | |
| Account No. | | | HSBC Retail Service | | | | |
| Representing: HSBC Card Services | | | PO Box 4144 Carol Stream, IL 60197-4144 | | | | |
| Account No. | | | Collection | | | | |
| LVNV Funding POB 10497 Greenville, SC 29603 | | - | | | | | Unknown |
| Sheet no. 6 of 10 sheets attached to Schedule of | | _ | | Sub | ota | 1 | 0.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | ge) | 0.00 |

Case 07-71986 Doc 1 Filed 08/22/07 Entered 08/22/07 10:57:59 Desc Main Page 22 of 50 Document

Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|---------|--|
| _ | _ | Debtor | |

| | | | | | | _ | | |
|--|----------|-------------|---|------------|-------------|--------|--------|----------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | | U N L | D | | |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | QU | SPUTED | AMOUNT | OF CLAIM |
| Account No. Unknown | | | Services rendered | T | E | | | |
| Mediacom 3900 26th Avenue Moline, IL 61265-4999 | | - | | | D | | | 100.00 |
| Account No. | | | Mediacom | T | T | T | | |
| Representing: Mediacom | | | PO Box 5744 Carol Stream, IL 60197-5744 | | | | | |
| Account No. | | | Mediacom LLC | Т | T | | | |
| Representing: Mediacom | | | Department 0002 Palatine, IL 60055-0002 | | | | | |
| Account No. 4311-9660-1453-8191 | 1 | T | Credit card purchases | T | T | T | | |
| National City PO Box 856176 Louisville, KY 40285-6176 | | - | | | | | | 3,000.00 |
| Account No. | t | T | National City | \dagger | T | t | | |
| Representing: National City | | | Card Services, K-A 16-2J PO Box 500 Kalamazoo, MI 49081 | | | | | |
| Sheet no7 of _10_ sheets attached to Schedule of | | | | Subi | | | | 3,100.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | ge) | 1 | , |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|---------|--|
| _ | | Debtor | |

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu H W J C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UZLLQULDAFED | DISPUTED | AMOUNT OF CLAIM |
|---|----------|------------------------|---|------------|--------------|-------------|-----------------|
| Account No. Representing: | | | National City 6750 Miller Rd. | | E | | |
| National City | | | Brecksville, OH 44141 | | | | |
| Account No. 634522522 | | | Collection for One Spirit Book Club | | | | |
| One Spirit Book Club c/o Penn Credit Corp. PO Box 988 Harrisburg, PA 17108-0988 | | - | | | | | |
| | | | | | | | 200.00 |
| Account No. Unknown Quality Water 12951 Scenic Bluff Rd. Savanna, IL 61074 | | - | Services rendered | | | | |
| Account No. 02100454-000 | | _ | Services rendered | | | | 100.00 |
| Savanna Times-Journal PO Box 218 Savanna, IL 61074 | | - | ocivious remacieu | | | | 100.00 |
| Account No. 5121-0718-5439-0857 | | | Credit card purchases | | | | |
| Sears Gold Mastercard PO Box 182156 Columbus, OH 43218-2156 | | _ | | | | | 2,300.00 |
| Sheet no. 8 of 10 sheets attached to Schedule of | <u> </u> | | <u> </u> | Sub | tota | <u>l</u> .1 | 2,700.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | e) | 2,700.00 |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No. | |
|-------|--------------------|----------|--|
| _ | | Debtor | |

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, | C O D E B T O R | H W | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | CONTI | UZLLQUL | D I S P U | |
|--|-----------------|--------|---|-----------|---------|-------------|-----------------|
| AND ACCOUNT NUMBER (See instructions above.) | T O R | C | IS SUBJECT TO SETOFF, SO STATE. | N G E N T | UIDATED | T E D | AMOUNT OF CLAIM |
| Account No. | | | Sears Credit Cards | | E | | |
| Representing: | | | PO Box 183081 | | ₽ | _ | |
| Sears Gold Mastercard | | | Columbus, OH 43218-3081 | | | | |
| Account No. 6303510831240 | _ | t | Repossessed 2001 Pontiac Montana | | | | |
| US Bank PO Box 790179 Saint Louis, MO 63179-0179 | | - | | | | | |
| | | | | | | | 7,500.00 |
| Account No. | | | US Bank PO Box 64799 | | | | |
| Representing: | | | St. Paul, MN 44164-0799 | | | | |
| US Bank | | | | | | | |
| Account No. | - | | US Bank PO Box 3098 | | | | |
| Representing: | | | Milwaukee, WI 53201-3098 | | | | |
| US Bank | | | | | | | |
| Account No. | - | | US Bank PO Box 790408 | | | | |
| Penroconting | | | Saint Louis, MO 63179-0408 | | | | |
| Representing: US Bank | | | · | | | | |
| US Balik | | | | | | | |
| Sheet no. 9 of 10 sheets attached to Schedule of | | | | Subi | | | 7,500.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | ge) | 1 |

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Official Form 6F (10/06) - Cont.

| In re | Kimberly Ann Gouty | Case No. |
|-------|--------------------|----------|
| • | | Debtor |

| CDEDITORIC NAME | С | Hu | sband, Wife, Joint, or Community | | | J | D | |
|---|----------|-----|---|---------|-----------|--------|---------|-----------------|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | 1 | N L | g J | ISPUTED | AMOUNT OF CLAIM |
| Account No. | | | US Bank | | Г | ГΙ | | |
| Representing: US Bank | | | PO Box 2407 Minneapolis, MN 55402 | | | E D | | |
| Account No. 7387369 | | | Utilities | | + | 1 | | |
| US Cellular PO Box 0203 Palatine, IL 60055-0203 | | - | | | | | | |
| | | | | | | | | 800.00 |
| Account No. | | | Diversified Adjustment Service, Inc | | | | | |
| Representing: US Cellular | | | PO Box 32145 Fridley, MN 55432-0145 | | | | | |
| Account No. | ┢ | | Valentine & Kebartas | + | + | + | | |
| | ł | | PO Box 325 | | | | | |
| Representing: US Cellular | | | Lawrence, MA 01842 | | | | | |
| Account No. 066185 | | | Collection for Yellow Book USA/West | + | \dagger | 1 | | |
| Yellow Book USA/West c/o Receivable Management Services PO Box 523 Richfield, OH 44286 | | _ | | | | | | 600.00 |
| Sheet no10_ of _10_ sheets attached to Schedule of | | | | Su | | | | 1,400.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total o | | - | _ | | 1,700.00 |
| | | | (Report on Summary of | | To edu | | | 23,300.00 |

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Form B6G (10/05)

| In re | Kimberly Ann Gouty | Case No | |
|-------|--------------------|---------|--|
| _ | | Debtor | |

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Carroll County Housing Authority Mount Carroll, IL 61053 Yearly apartment lease 4/07 - 4/08

Verizon Wireless Savanna, IL 61074 2 year cell phone contract 6/07 - 6/09

____ continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

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Form B6H (10/05)

| In re | Kimberly Ann Gouty | Case No. | |
|-------|--------------------|----------|--|
| - | | Debtor | |

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Official Form 6I (10/06)

| In re | Kimberly Ann Gouty | | Case No. | |
|-------|--------------------|-----------|----------|--|
| | | Debtor(s) | | |

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

| Debtor's Marital Status: DEPENDENTS OF DEE | | | POUSE | | |
|---|---|--------------------|--------|-------|--------|
| Divorced | RELATIONSHIP(S): Son Son | AGE(S): 15 9 | | | |
| Employment: | DEBTOR | | SPOUSE | | |
| Occupation | | | | | |
| Name of Employer | N/A | | | | |
| How long employed | | | | | |
| Address of Employer | | | | | |
| | or projected monthly income at time case filed) | | DEBTOR | | SPOUSE |
| | nd commissions (Prorate if not paid monthly) | \$ _ | 0.00 | \$ | N/A |
| 2. Estimate monthly overtime | | \$ | 0.00 | \$ | N/A |
| 3. SUBTOTAL | | \$ | 0.00 | \$ | N/A |
| 4. LESS PAYROLL DEDUCTIO | DNS | | | | |
| a. Payroll taxes and social se | | \$ | 0.00 | \$ | N/A |
| b. Insurance | · | \$ _ | 0.00 | \$ | N/A |
| c. Union dues | | \$ | 0.00 | \$ | N/A |
| d. Other (Specify): | | \$ | 0.00 | \$ | N/A |
| | | \$ | 0.00 | \$ | N/A |
| 5. SUBTOTAL OF PAYROLL I | DEDUCTIONS | \$ | 0.00 | \$ | N/A |
| 6. TOTAL NET MONTHLY TA | KE HOME PAY | \$ | 0.00 | \$ | N/A |
| | n of business or profession or farm (Attach detailed | statement) \$ | 0.00 | \$ | N/A |
| 8. Income from real property | | \$ _ | 0.00 | \$ | N/A |
| 9. Interest and dividends 10. Alimony maintenance or sup | port payments payable to the debtor for the debt | or's use or | 0.00 | \$ | N/A |
| that of dependents listed abo 11. Social security or governmen | ve | \$ | 168.00 | \$ | N/A |
| (Specify): Linlk card | t usbistance | \$ | 259.00 | \$ | N/A |
| | | <u> </u> | 0.00 | \$ | N/A |
| 12. Pension or retirement income | | \$ | 0.00 | \$ | N/A |
| 13. Other monthly income | | | | | |
| (Specify): | | \$ | 0.00 | \$ | N/A |
| | | \$ | 0.00 | \$ | N/A |
| 14. SUBTOTAL OF LINES 7 TI | HROUGH 13 | \$ | 427.00 | \$ | N/A |
| 15. AVERAGE MONTHLY INC | COME (Add amounts shown on lines 6 and 14) | \$ | 427.00 | \$ | N/A |
| 16. COMBINED AVERAGE MO from line 15; if there is only one deb | ONTHLY INCOME: (Combine column totals tor repeat total reported on line 15) | | \$ | 427.0 | 0 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None**

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Official Form 6J (10/06)

| In re | Kimberly Ann Gouty | | Case No. | |
|-------|--------------------|-----------|----------|--|
| | | Debtor(s) | | |

SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| Complete this schedule by estimating the average or projected monthly expenses of the debtor and th filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. | e debtor's far | mily at time case |
|---|----------------|-------------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse." | ete a separate | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 29.00 |
| a. Are real estate taxes included? Yes No _X_ | * <u> </u> | |
| b. Is property insurance included? Yes NoX | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 125.00 |
| b. Water and sewer | \$ | 0.00 |
| c. Telephone | \$ | 65.00 |
| d. Other | \$ | 0.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 0.00 |
| 4. Food | \$ | 259.00 |
| 5. Clothing | \$ | 25.00 |
| 6. Laundry and dry cleaning | \$ | 0.00 |
| 7. Medical and dental expenses | \$ | 0.00 |
| 8. Transportation (not including car payments) | \$ | 50.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 25.00 |
| 10. Charitable contributions | \$ | 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 0.00 |
| c. Health | \$ | 0.00 |
| d. Auto | \$ | 0.00 |
| e. Other | \$ | 0.00 |
| e. Other 12. Taxes (not deducted from wages or included in home mortgage payments) | | |
| (Specify) | \$ | 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the | | |
| plan) | | |
| a. Auto | \$ | 0.00 |
| b. Other | \$ | 0.00 |
| c. Other | \$ | 0.00 |
| d. Other | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 0.00 |
| 17. Other | \$ | 0.00 |
| Other | \$ | 0.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, | \$ | 578.00 |
| if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | | |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year | | |
| following the filing of this document: | | |
| 20 STATEMENT OF MONTHLY NET INCOME | _ | |
| 20. STATEMENT OF MONTHLY NET INCOME | ¢. | 407.00 |
| a. Average monthly income from Line 15 of Schedule I | \$ | 427.00 |
| b. Average monthly expenses from Line 18 above | \$ | 578.00 -151.00 |
| c. Monthly net income (a. minus b.) | » | -151.00 |

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Official Form 6-Declaration. (10/06)

United States Bankruptcy Court Northern District of Illinois

| In re | Kimberly Ann Gouty | | | Case No. | |
|-------|--|-----------|--|----------|---|
| | | | Debtor(s) | Chapter | 7 |
| | DECLARATION CONCERNING DEBTOR'S SCI | | | | |
| | I declare under penalty of perjury tha 24 sheets [total shown on summary page knowledge, information, and belief. | | | | |
| Date | August 22, 2007 | Signature | /s/ Kimberly Ann Gouty Kimberly Ann Gouty Debtor | y | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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Official Form 7 (04/07)

United States Bankruptcy Court Northern District of Illinois

| In re | Kimberly Ann Gouty | | Case No. | |
|-------|--------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$607.00 YTD approximate gross income from self-employment
\$14,250.00 2006 gross income from self-employment
\$18,057.00 2005 gross income from self-employment

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|------------|--|
| \$1,300.00 | YTD approximate gross income from child support |
| \$2,000.00 | YTD link card |
| \$2,015.52 | 2006 approximate gross income from child support |
| \$2,015.52 | 2005 gross income from child support |

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | | AMOUNT | |
|------------------------------|-----------|-----------|--------------|
| | DATES OF | PAID OR | |
| | PAYMENTS/ | VALUE OF | AMOUNT STILL |
| NAME AND ADDRESS OF CREDITOR | TRANSFERS | TRANSFERS | OWING |

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

AMOUNT STILL

OWING

LATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT AND CASE NUMBER Capital One Bank v. Kimberly Gouty 07 SC 89 | NATURE OF PROCEEDING Civil Suit | COURT OR AGENCY AND LOCATION 15th Judicial Circuit Court Carroll County, Mt. Carroll, Illinois. | STATUS OR DISPOSITION Judgment pending |
|---|---------------------------------|---|--|
| Discover Bank v. Kimberly Gouty 07 SC 32 | Civil Suit | 15th Judicial Circuit Court Carroll County, Mt. Carroll, Illinois. | Judgment pending |
| Andrea Lease v. Kimberly Gouty, 07OP31 | Order of Protection | 15th Judicial Circuit Court, Carroll County, IL | Close |

3

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER US Bank PO Box 790179 Saint Louis, MO 63179-0179 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN 1/2007

DESCRIPTION AND VALUE OF PROPERTY 2001 Pontiac Montana

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Attorney Mark E. Zaleski 10 North Galena Avenue Suite 220 Freeport, IL 61032

DATE OF PAYMENT. NAME OF PAYOR IF OTHER THAN DEBTOR 8/8/07

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$506.00 for attorney fees \$299.00 for court filing fees \$95.00 for credit counseling

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER Mary A. Gouty Savanna, IL 61074

Paul Thulen Savanna, IL 61074 DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

5/06 - 4/07

5

Debtor occasionally drives a 2003 Pontiac Vibe belonging to her mother. Debtor occasionally drives a Ford Escort wagon belonging to her boyfriend

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

21 E. 5th Street Same

Savanna, IL 61074

604 Viaduct Rd. Same 2004 - 5/06

Savanna, Illinois

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

6

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER

NAME Kimberly Gouty ADDRESS Savanna, IL 61074 NATURE OF BUSINESS

BEGINNING AND ENDING DATES

Massage Therapy 2003 - 1/2007

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME ADDRESS

I.D. NO.

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS
Miner, Gilroy & Meade, CPA, PC
127 1/2 Main Street
Savanna, IL 61074

DATES SERVICES RENDERED

2003 - Present

Kimberly Gouty Savanna, IL 61074

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

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Document Page 37 0130

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

Miner, Gilroy & Meade, CPA, PC

127 1/2 Main Street Savanna, IL 61074

Kimberly Gouty

Savanna, IL 61074

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY
DATE OF INVENTORY INVENTORY SUPERVISOR (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

7

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22 . Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year**

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

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23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 8

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date August 22, 2007 Signature /s/ Kimberly Ann Gouty
Kimberly Ann Gouty
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

9

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Form 8 (10/05)

United States Bankruptcy Court Northern District of Illinois

| In re | Kimberly Ann Gouty | | | Case No. | | |
|---|---|--------------------------|---|-------------------------------------|---|--|
| | • | | Debtor(s) | Chapter | 7 | |
| | CHAPTER 7 INDI | VIDUAL DEBTO | OR'S STATEME | NT OF INT | ENTION | |
| | I have filed a schedule of assets and liabili | ties which includes debt | ts secured by property o | f the estate. | | |
| | I have filed a schedule of executory contra | cts and unexpired leases | s which includes person | al property subje | ect to an unexpire | ed lease. |
| ☐ I intend to do the following with respect to property of the estate which secures those debts or is subject to a lease: | | | | | | |
| Descri | ption of Secured Property | Creditor's Name | Property will be Surrendered | Property is claimed as exempt | Property will be redeemed pursuant to 11 U.S.C. § 722 | Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c) |
| -NONE- | | | | | | |
| Descri Proper | - | Lessor's Name | Lease will be assumed pursuan to 11 U.S.C. § 362(h)(1)(A) | t | | |
| Date | August 22, 2007 | Signature | /s/ Kimberly Ann Go Kimberly Ann Gout Debtor | | | |

Case 07-71986 Doc 1 Filed 08/22/07 Entered 08/22/07 10:57:59 Desc Main Document Page 41 of 50 United States Bankruptcy Court Northern District of Illinois

| In re | Kimberly Ann Gouty | | Case No |). | |
|-------|---|---|---|--|-----------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COM | IPENSATION OF ATTO | RNEY FOR I | DEBTOR(S) | |
| (| Pursuant to 11 U.S.C. § 329(a) and Bankrupto compensation paid to me within one year before the rendered on behalf of the debtor(s) in contemplations. | he filing of the petition in bankruptc | cy, or agreed to be j | oaid to me, for service | |
| | For legal services, I have agreed to accept | | \$ | 506.00 | |
| | Prior to the filing of this statement I have rece | eived. | \$ | 506.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. 7 | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed | compensation with any other person | unless they are me | embers and associates | of my law firm. |
| 5. I | ☐ I have agreed to share the above-disclosed concopy of the agreement, together with a list of the fin return for the above-disclosed fee, I have agreed a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedule c. Representation of the debtor at the meeting of c. [Other provisions as needed] | the names of the people sharing in the I to render legal service for all aspect rendering advice to the debtor in de s, statement of affairs and plan which creditors and confirmation hearing, a | e compensation is a ts of the bankruptcy termining whether h may be required; and any adjourned h | ttached. v case, including: to file a petition in bar | |
| б. 1 | By agreement with the debtor(s), the above-disclos Representation of the debtors in ar other adversary proceeding. Negot original loan. Negotiation, preparat pursuant to 11 USC 522(f)(2)(A) for | ny dischargeability actions, lien iations with secured creditors ion and filing of reaffirmation a | n avoidances, re to reduce collate agreements. Pre | eral to market value | e or to modify |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement ankruptcy proceeding. | of any agreement or arrangement for | r payment to me for | representation of the | debtor(s) in |
| Dated | l: August 22, 2007 | /s/ Mark E. Zales | ski | | |
| | | Mark E. Zaleski Mark E. Zaleski | | | |
| | | 10 North Galena | Avenue | | |
| | | Suite 220 | 22 | | |
| | | Freeport, IL 6103 | | | |
| | | 815-233-0995 Fa | ax: 815-232-3227 | • | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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B 201 (04/09/06)

Mark E. Zaleski

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

X /s/ Mark E. Zaleski

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Printed Name of Attorney | Signature of Attorney | Date |
|--|------------------------------------|-----------------|
| Address: | | |
| 10 North Galena Avenue | | |
| Suite 220 | | |
| Freeport, IL 61032 | | |
| 815-233-0995 | | |
| I (We), the debtor(s), affirm that I (we) ha | | |
| Kimberly Ann Gouty | X /s/ Kimberly Ann Gouty | August 22, 2007 |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | X | |
| | Signature of Joint Debtor (if any) | Date |

August 22, 2007

United States Bankruptcy Court Northern District of Illinois

| | | Northern District of Illinois | | |
|-------|--|--|-------------------|---------------------------|
| In re | Kimberly Ann Gouty | | Case No. | |
| | | Debtor(s) | Chapter | 7 |
| | VF | ERIFICATION OF CREDITOR MA | ATRIX | |
| | | Number of 0 | Creditors: | 55 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credito | ors is true and c | correct to the best of my |
| | | | | |

AFNI, Inc. PO Box 3097 Bloomington, IL 61702

Alliant Energy PO Box 351 Cedar Rapids, IA 52406-0351

Allied Business Accounts, Inc. 300 1/2 South Second Street PO Box 1600 Clinton, IA 52733-1600

American Recovery Systems 555 St. Charles Dr., Suite 100 Thousand Oaks, CA 91360

Arrow Financial Services LLC 21031 Network Place Chicago, IL 60673-1210

AT&T PO Box 9001309 Louisville, KY 40290

Baker, Miller, Markoff & Krasny 29 N. Wacker Drive, 5th Floor Chicago, IL 60606

Blatt, Hasenmiller, Leibsker and Moore 125 S, Wacker Dr., Suite 400 Chicago, IL 60606

Brad Deary Motors Factory Outlet Store PO Box 1000 Maquoketa, IA 52060

Bridgeview Mental Health 638 South Bluff Rd. Clinton, IA 52732

Businessmen's Collection Bureau PO Box 657 Freeport, IL 61032

Capital One Bankruptcy Department PO Box 5155 Norcross, GA 30091

Capital One Bankruptcy Department PO Box 85167 Richmond, VA 23285-5167

Capital One Bank PO Box 60067 City Of Industry, CA 91716-0067

Capital One Bank PO Box 790216 Saint Louis, MO 63179-0216

Carroll County Housing Authority Mount Carroll, IL 61053

City of Savanna 101 Main Street Savanna, IL 61074

Clinton Veternarian Clinic c/o Creditor Services PO Box 52733 Clinton, IA 52733

Conseco Payment Services PO Box 981206 El Paso, TX 79998

Creditor Protection Association 13355 Noel Rd. Dallas, TX 75240

Discover PO Box 30395 Salt Lake City, UT 84130-0395

Discover PO Box 15192 Wilmington, DE 19850-5192

Discover Financial Services PO Box 3007 New Albany, OH 43054-3007

Dish Network
Department 0063
Palatine, IL 60055-0063

Diversified Adjustment Service, Inc PO Box 32145 Fridley, MN 55432-0145

East Savanna Welding c/o Businessmen's Collection Bureau PO Box 657 Freeport, IL 61032

Freeport Health Network/Hospital Central Business Office PO Box 857 Freeport, IL 61032-0857

Gallatin River Communications PO Box 1800 Galesburg, IL 61402-1800

H&R Accounts, Inc. 7017 John Deere Parkway PO Box 672 Moline, IL 61265

Household Bank PO Box 17051 Baltimore, MD 21297-1051 Household Credit Services PO Box 88000 Baltimore, MD 21288-0001

HSBC Card Services PO Box 17051 Baltimore, MD 21297-1051

HSBC Card Services PO Box 15521 Wilmington, DE 19805

HSBC Retail Service PO Box 4144 Carol Stream, IL 60197-4144

LVNV Funding POB 10497 Greenville, SC 29603

Mediacom 3900 26th Avenue Moline, IL 61265-4999

Mediacom PO Box 5744 Carol Stream, IL 60197-5744

Mediacom LLC Department 0002 Palatine, IL 60055-0002

National City PO Box 856176 Louisville, KY 40285-6176

National City Card Services, K-A 16-2J PO Box 500 Kalamazoo, MI 49081

National City 6750 Miller Rd. Brecksville, OH 44141 One Spirit Book Club c/o Penn Credit Corp. PO Box 988 Harrisburg, PA 17108-0988

Quality Water 12951 Scenic Bluff Rd. Savanna, IL 61074

Savanna Times-Journal PO Box 218 Savanna, IL 61074

Sears Credit Cards PO Box 183081 Columbus, OH 43218-3081

Sears Gold Mastercard PO Box 182156 Columbus, OH 43218-2156

US Bank PO Box 790179 Saint Louis, MO 63179-0179

US Bank PO Box 64799 St. Paul, MN 44164-0799

US Bank PO Box 3098 Milwaukee, WI 53201-3098

US Bank PO Box 790408 Saint Louis, MO 63179-0408

US Bank PO Box 2407 Minneapolis, MN 55402

US Cellular PO Box 0203 Palatine, IL 60055-0203 Valentine & Kebartas PO Box 325 Lawrence, MA 01842

Verizon Wireless Savanna, IL 61074

Yellow Book USA/West c/o Receivable Management Services PO Box 523 Richfield, OH 44286